



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

525 WEST JEFFERSON ST. • SPRINGFIELD, ILLINOIS 62761 • (217) 782-3516 FAX: (217) 785-4111

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

October 31, 2017

Kristen Barrish, V.P. Physical Plant & Dietary
S.I.R. Management, Inc.
6840 N. Lincoln Avenue
Lincolnwood, IL 60712

RE: Notice Requirement for Submitting the Final Realized Costs Report for Project # 15-008

Dear Kristen Barrish,

Please accept this letter as notice that you are required to submit the Final Realized Costs Report for Project # 15-008 Applewood Rehabilitation Center, Matteson. Pursuant to the Illinois Health Facilities Planning Act (Act), this notice fulfills the Health Facilities and Services Review Board's (State Board) requirement for providing notice to permit holders of post-permit reporting requirements. The project must be completed by **December 31, 2017**. Your notice of project completion and final realized costs report is due no later than **March 31, 2018**.

The requirements for a compliant Final Realized Costs Report are set forth in the State Board's regulations under 77 Ill. Adm. Code 1130.770. Your request should adhere to these requirements.

Please be aware that this permit is valid only for the approved construction or modification, site, amount and the named permit holders. If the permit holder believes that a change to the project will occur, please refer to 77 Ill. Adm. Code 1130.750 for allowable alterations and the proper procedure for pursuing an alteration. Any change to a permit may constitute an alteration; all alternations shall be reported to/approved by the State Board prior to execution.

In accordance with the Act, the permit is valid until such time as the project has been completed, provided that all post-permit requirements have been fulfilled. If the permit holder believes that additional time is required to complete the project, please refer to 77 Ill. Adm. Code 1130.740 for the proper procedure for pursuing a permit renewal.

Failure to comply with the post-permit requirements may result in fines as defined in the Act and State Board regulations.

If you have already submitted your Notice of Project Completion and Final Realized Costs Report, please disregard this notice. Should you have any questions regarding this notice, please contact Jeannie Mitchell at 312-814-6226.

Sincerely,

A handwritten signature in blue ink that reads "Kathy Olson".

Kathy Olson, Board Chair
Illinois Health Facilities and Services Review Board